D43/3

THE SEARCH FOR HEALTH

A Report from
The National Institutes of Health
Bethesda, Maryland

A CENTURY OF SCIENCE FOR HEALTH 1887 1987 NATIONAL INSTITUTES OF HEALTH

NEWARK PUBLIC LIBRARY

APR 8 1986

U. S. GOVT. PUBS.
DEPOSITORY 375

THE SEARCH FOR HEALTH

A Report from
The National Institutes of Health
Bethesda, Maryland

Pain and Anxiety Control in Dentistry

Pain and dentistry are synonymous in the minds of many patients. This is not surprising in view of the discomfort that sometimes accompanies dental procedures. Many people avoid or postpone treatment for this reason, thereby assuring future discomfort as dental neglect can lead to cavities and gum diseases. In fact, some 35 million Americans avoid needed dental treatment until forced into the dentist's office with a toothache.

Recognition of the significance of pain and apprehension as impediments to dental care has led to the development of an array of techniques to overcome these obstacles. The techniques include psychological approaches, local anesthetics, and various types and combinations of sedatives and general anesthetic agents. Use of these techniques helps overly-fearful patients who avoid or postpone dental treatment, as well as normal patients undergoing stressful dental procedures.

Even patients who receive routine dental treatment sometimes require pain control to reduce the discomfort associated with fillings or surgical procedures such as tooth extractions and the resulting postoperative pain. General anesthetics or anxiety-reducing drugs often are required during the removal of third molars (wisdom teeth), for example, so that patients can easily tolerate the procedure. The result is that practicing dentists need to be experts in controlling acute pain and anxiety so they can provide successful treatment.

While the use of drugs always has been associated with some degree of risk, an NIH Consensus Development Conference on "Anesthesia and Sedation in the Dental Office", convened in April 1985, concluded that the use of sedative and anesthetic drugs in the dental office by appropriately trained professionals has a remarkable record of safety.

The panel of experts defined sedation as a depressed level of consciousness, ranging from light to deep, whose main purpose is to control anxiety. Local anesthetics are given along with sedatives to control pain. General anesthetics is a state in which the patient is unconscious and, therefore, relieved of both pain and anxiety. There is some indication that treatment with local anesthesia and conscious sedation carries less risk than does treatment with deep sedation or general anesthesia. The risks may increase in the medically compromised, the elderly, and the very young.

Ultimately, however, the decision about which drug or drugs to use in a particular situation rests on the clinical judgment of the dentist. Factors to be considered include the nature, severity, and duration of the procedure; the age, physical, and psychological status of the patient; the patient's level of fear and anxiety; and the patient's previous response to pain control procedures.

Research on dental anxiety also has yielded valuable information. Investigators have found that developing a positive attitude in young children towards dental appointments lays the groundwork for a lifetime interest in good oral health. To prevent dental anxiety from starting, dentists urge parents to bring their children in for dental appointments at a very young age — two and a half to three years old. At this time, the dentist familiarizes the child with the dental chair and equipment and encourages the parents to help their child use preventive measures which will minimize or prevent dental problems.

Researchers also are experimenting with a number of different techniques to reduce dental anxiety in children if it occurs. For example, children may be taught how to manage stress through such methods as controlled breathing and visualing pleasant scenes. Or they may be given earphones so that they can listen to stories being read while they are quiet and cooperative during their dental appointment. Other studies show that in older children, observing a peer model undergoing dental treatment may help reduce anxiety.

Researchers suggest the following pointers to ease children's fears about dental appointments:

- Teach children good oral hygiene and emphasize that the dentist helps them keep their teeth healthy.
- Never threaten a child with a visit to the dentist.
- Do not prepare a child too far in advance of a dental appointment. A child under the age of five or six can usually be told the same day.
- Put the dental treatment into perspective. If there is going to be pain, let the child know that the pain only lasts a minute or two.
- Select a dentist who is experienced in working with children.

Effective use of pharmacologic and behavioral methods of pain control promises relief of the pain and anxiety that some people associate with dental procedures. For children and adults, a trip to the dentist need no longer be a dreaded experience.

National Children's Dental Health Week

Helen Ou, Editor
NIH New Branch
Building 31, room 2B-10
Bethesda, MD 20205
Phone (301) 496-2535

NIH is an operating agency of the U.S. Department of Health and Human Services.

4-NIDR-2/86

READEX